2							_	09	7	896	79	
PATENT A	.PPLICATIO	N FEE DE	TERM	INATIO	ON RECOR	RD	Ap	plication	or Do	cket Numi	per	
		ve Octobe						791	9	679		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
AL CLAIMS		20				-	RATE	FEE) [RATE	FEE	
		NUMBER F	ILED	NUMB	ER EXTRA	8	ASIC FEE	355.00	OR	BASIC FEE	710.00	
AL CHARGEA	BLE CLAIMS	20minus 20= .			+		X\$ 9=		OR	X\$18=		
PENDENT CL	AIMS	2 minus 3 = A					X40=		OR	X80=	·	
TIPLE DEPENI	RESENT					+135=		OR	+270=			
ne difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	710	
Claims as amended - Part II							1	<u></u>	J	OTHER		
	(Column 1)		(Colu		(Column 3)	=	SMALL		OR	SWALLE	,	
(A)	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
ndependent	•	Minus	***		=		X40=		OR	X80=		
IRST PRESE	NTATION OF M	JLTIPLE DEF	ENDEN	T CLAIM			+135=		OR	+270=		
						L	TOTAL		OR	TOTAL		
	(Column 1)		(Colu	ımn 2)	(Column 3)	Α[ODIT. FEE		Jon	ADDIT. FEE	<u> </u>	
A	CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HESY MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	.20	Minus	••	0	= <		X\$ 9=		OR	X\$18=		
Independent	· W	Minus	•••	3	= '		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405		1	+270=		
updated	of one		•				+135= TOTAL		OR	TOTAL ADDIT. FEE		
01 'N	(Column 1)		(Coli	ımn 2)	(Column 3)	AL	ODIT. FEE			ADDII, FEE	LE	
•	CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	. 6	Minus	2				X\$ 9=		OR	X\$18=		
									19	II	4	

(Column 2) (Column 3 (Column 1) HIGHEST CLAIMS NUMBER REMAINING PRESENT PREVIOUSLY **EXTRA AFTER** AMENDMENT PAID FOR Minus り Total 0 Minus Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the difference in column 1 is less than zero, enter "0" in column 2

TOTAL CLAIMS

TOTAL CHARGEABLE CLAIMS

MULTIPLE DEPENDENT CLAIM PRESENT

INDEPENDENT CLAIMS

FOR

ENT

8

ES

MENDM

Total

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

ADDIT, FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE Is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independ nt) is the highest number found in the appropriate box in column 1.

X40=

+135=

TOTAL

OR

OR

OR

X80=

+270=

ADDIT. FEE

TOTAL